

ISSUE SLIP ST/ FILE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER		59	111
FORMALITY REVIEW	Am	917	12-14-00
RESPONSE FORMALITY REVIEW	Request	925	03-28-01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
1	8/1/02
2	3/6/03
3	11/19/03
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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